

Missouri Ethics Commission (MEC) COO1072 PO Box 1370, Jefferson City MO 65102, Fax: 573-526-4506, helpdesk@mec.mo.gov

1072 JAN 2 6 2023

Statement of Committee Organization

1.	Statement Information		
	Date: <u>JAN. 22</u> 202 3	~ · · · · · · · · · · · · · · · · · · ·	Chang
	Type: ☐ New ☐ Amended (if amending, enter MEC ID CO	& section cha	anged <u>En Ail Polcine</u>
2.	Committee Information		
	CITIZERS FOR DAN TARWATER		
	1007 W. 12157 ST CONQ 6 Committee Mailing Address, City, State, & Zio	4145	(86)665-6926 Telephone Number Electrian Board
	Committee Mailing Agaress, City, State, & Zio	KANSAS CITY	Election Board
	Official Committee Email Address	County Clerk, Board of Election Commissione	
	Committee Type: ☐ Campaign ☐ Candidate ☐ Continuing (P.	AC) 🗌 Debt Service 🗎 Explo	oratory 🔲 Political Party
3.	Treasurer/Deputy Treasurer Information	the state of the state of	
	PAULA THRWATER	, -	
	Treasurer's Name (First & Last)	Treasurer's Email Address (optional)	
	Treasurer's Mailing Address, City, State, & Zip 641 45	(<u>B16)</u> <u>lo 65 - 6940</u> Treasurer's Home Telephone Number	() Treasurer's Work Telephone Number
	Deputy Treasurer's Name (if one appointed)		
	Deputy Treasurer's Name (if one appointed) CB) 5 Cherry #2 6413;	Calla 895-7444	<i>(</i>)
	Deputy Treasurer's Mailing Address, City, State, & Zip	Dep. Treasurer's Home Telephone Number	Dep. Treasurer's Work Telephone Number
4.	Additional Committee Information		• • •
	Additional Committee Officer's Name & Title (if any)	Additional Committee Officer's Mailing Address	ess, City, State, & Zip
	Connected Organization's Name (if any)	Connected Organization's Mailing Address, C	ity, State, & Zip
	CANDIDATES: Do you have more than one candidate committee?	Yes (refer to instructions on b	oack) 🖫 No
5.	Official Bank Account Information (required by all committees)		
	, n	•	
5.	Candidate Supported or Opposed (candidate committees must i	nclude self. if candidate)	
	The state of the s	()	()
	Name & Mailing Address, City, State & Zip of Candidate	Telephone Number (Candidate Committees	endment
	Election Date Office Sought & Political Subdivision	Political Party :	Support or Oppose
7.	Ballot Measure Supported or Opposed (campaign committees m	ust complete this section)	· · · · · · · · · · · · · · · · · · ·
	Name of Bailot Measure	Election Date & Political Subdivision	Support or Oppose
3.	Signature(s) - Check certification(s) & sign (required by all comm	ittees)	<u>; </u>
	A affirm and attest under penalty of perjury that information and		ete, true, and accurate 1
	in the acknowledge that I am aware that any false statement or declaration made herein is punishable under Ch. 575 RSMo.		
1	Harda Konnatas	1/1/2	
7	Committee Treasurer	Candidate (Candidate Committees Only)	weell & JB